

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 10, 2001 8:00 am**  
**Secretary of State**

04-10-2001 90056 021 \*\*\*\*61.25

0093306

**DOCUMENT # N09154**

1. Entity Name

**WISCONSIN ALUMNI ASSOCIATION OF SARASOTA-MANATEE**

Principal Place of Business

Mailing Address

C/O ALLAN E. JONES

46 NORTH WASHINGTON BLVD  
 SARASOTA, FL. 34236

**Douglas L. DeVos**

2. Principal Place of Business

3. Mailing Address

46 NORTH WASHINGTON BLVD  
 SUITE 18

7713 4TH AVE. WEST  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

SARASOTA, FLORIDA

City & State

BRADENTON, FLORIDA

4. FEI Number

65-0039321

Applied For

Not Applicable

Zip

34236

Country

SARASOTA

Zip

34209

Country

MANATEE

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TREVETHALI, MARILYN  
 1268 SPOONBILL LANDINGS CR  
 BRADENTON FL 34209

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
 NAME DEVOS, DOUGLAS ☐ Delete  
 STREET ADDRESS 7713 4TH AVE W  
 CITY-ST-ZIP BRADENTON FL 34209

TITLE T ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE D  
 NAME KEITH, JONES ☐ Delete  
 STREET ADDRESS 2110 TIMUCA TRAIL  
 CITY-ST-ZIP NOKOMIS FL 34275

TITLE P ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE D ☒ Delete  
 NAME BOGER, ROBERT  
 STREET ADDRESS 1262 SPOONBILL LANDINGS CIRCLE  
 CITY-ST-ZIP BRADENTON FL 34209

TITLE V.P. ☐ Change ☒ Addition  
 NAME BERNINGER, LOUIS  
 STREET ADDRESS 5509 37th AVE EAST #301  
 CITY-ST-ZIP BRADENTON, FL. 34208

TITLE D ☐ Delete  
 NAME CHAPMAN, MARILOU  
 STREET ADDRESS 1511 SCARLET OAK LANE  
 CITY-ST-ZIP BRADENTON FL 34209

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE P ☒ Delete  
 NAME WILLIS, BILL  
 STREET ADDRESS 604 JACAPANDA ROAD  
 CITY-ST-ZIP ANNA MARIA FL

TITLE D ☐ Change ☒ Addition  
 NAME BARK, GEORGE  
 STREET ADDRESS 1935 GULF OF MEXICO DRIVE  
 CITY-ST-ZIP LONGBOAT KEY, FL. 34228

TITLE VP ☐ Delete  
 NAME SORENSON, JUANITA  
 STREET ADDRESS 4310 FALMOUTH DR APT 104  
 CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE D ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Douglas L. DeVos** 4-7-01 794-1821  
 TREAS. Date Daytime Phone #

CR2E037 (10/00)